

# DOG LICENSE APPLICATION & RENEWAL FORM

For Office Use Only:

New License Number

New Expiration Date

ID:



**Note: expiration date cannot be later than month of rabies expiration date.**

## Renewal Fees eff. 09/01/10

Non-neutered dog \$42.00  
Spayed/Neutered dog\* \$17.00  
Over 65 with Neutered dog\* \$ 6.00  
Late Fee \$2.00 - \$4.00/month  
\*Signed proof by veterinarian required

## OFFICE OF THE TOWN CLERK

16705 E. Avenue of the Fountains  
Fountain Hills, AZ 85268  
Ph: (480) 816-5100  
Fax: (480) 837-3145  
www.fh.az.gov

## OWNER INFORMATION

Last Name

First Name

Mailing Address

Street Address (if different from mailing address)

Home Phone

Cell/Work Phone

Email Address

## PET INFORMATION

Dog Name Breed Color Sex Sex - Yes - No Spayed/Neutered?

License Expires

Rabies Vaccination Expires\*

Veterinarian Name, City & State

License Fee

Penalty Fee:

Veterinarian Signature

## PAYMENT INFORMATION

- ☐ Cash/Money Order (please do not mail cash) \$ \_\_\_\_\_  
☐ Check payable to the Town of Fountain Hills\* Ck# \_\_\_\_\_ \$ \_\_\_\_\_  
☐ Mastercard/Visa\* # \_\_\_\_\_ Exp \_\_\_\_\_ (mo/yr)



**\*Proof of rabies vaccination is required with new applications. For renewals, if rabies vaccination is due to expire soon, please provide new proof from veterinarian with your renewal.**

Section 6-2-3(D) of the Town Code requires that all dogs have current rabies vaccinations and be licensed by the Town of Fountain Hills (a separate Maricopa County license is not required); the license should be attached to a collar or harness and be worn by the dog at all times. The term of the license is based on the month and day of the most current rabies vaccination record and is valid for one calendar year.

**Failure to license your dog as required is a class two misdemeanor, and upon conviction thereof shall be punished by a fine not to exceed seven hundred and fifty dollars (\$750). Each day that a violation continues shall be a separate offense punishable as hereinabove described.**

I certify that all statements answered on this form are true and complete.

Signature of Owner

Telephone

Date

Print Name